

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46763

FILED
Apr 23, 2009
Secretary of State

Entity Name: REGENT PARK VILLAS III ASSOCIATION, INC.

Current Principal Place of Business:

745 12TH AVE S #AA
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

745 12TH AVE S. AA
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0407138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE PROPERTY MANAGEMENT
745 12TH AVE. S #AA
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARSONS, HAROLD
Address: 10148 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: T () Delete
Name: JOHN, FLORENCE
Address: 10170 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: DEANGELIS, NANCY
Address: 10186 REGENT CIR
City-St-Zip: NAPLES, FL 34109

Title: VP () Delete
Name: FLORIAN, TIGER
Address: 10180 KING GEORGE LANE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: PANEBIANCO, DIANA
Address: 10150 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD PARSONS

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date